



Networking Hour

Welcome to the Networking Hour!





Member Forum

April 26, 2024



Board Chair Report

Welcome

- *Donna Elbrecht, President/CEO, Easterseals Arc of Northeast Indiana & Cardinal Services*

Today's Agenda

- Ability Indiana Panel Discussion
- Association Update
 - *Nanette Hagedorn, INARF*
- Industry Update
 - *Katy Stafford-Cunningham, Brandi Foreman, & Courtney Scott, INARF*



Upcoming Events

- INARF Leadership Academy - Class of 2024 / Class 3 – May 2 & 3
- INARF Person-Centered Individual Support Plan Facilitator Training – May 7 & 8
- INARF Professional Interest Section Meetings – May 9
- INARF Webinar: Introduction to the Basic Assurances / in partnership with CQL – May 14
- INARF Board of Directors Meeting – May 24



Registration opens 3 weeks in advance. To register for open events, scan the QR code or go to <https://web.inarf.org/events>



INARF Member Forum Panel

April 26, 2024

Meet the Panelists



- **Tim Donlin**
 - CFO, ADEC, Inc.
- **Joe McKinney**
 - Director, Tandem Solutions
- **Melissa Sharp**
 - COO/Executive Vice President, Southern Indiana Resource Solutions, Inc.
- **Jeff Uhey**
 - Director of Operations, Child Adult Resource Services, Inc.
 - Chairman of the Ability Indiana Board of Directors

Thank you!



Questions/Comments?



Association Update

Nanette Hagedorn, INARF



Membership Recruitment

Introducing: **Independence Support Services, LLC**



Located in Nineveh, Independence Support Services' desire is to "provide quality Home Community Based Services emphasizing the importance of individual Person-Centered Care and freedom, while integrating services showing respect for the individual facilitating and incorporating a collaborative individualized Person-Centered Service Plan." Currently they are offering Community Habilitation, Participant Assistance and Care, Residential Habilitation and Respite Care Services in Bartholomew, Brown, Johnson, Marion, Morgan and Shelby counties.

We encourage you to contact Missy at missyr@indhhc.com to extend a warm welcome and to learn more.



2024 Professional Development

June 11 | 9 AM - 4 PM

Professional Development Training: Incident Investigations & Recommendations Training (In-Person)

Donna Blair, Consultant

August 27 | 9 AM - Noon

Professional Development Training: HIPAA Violations – Prevention, Reaction, and Compliance Training (In-Person)

Eileen Maguire, Eileen Maguire Law Office, P.C.

September 10 | 9 AM - 4 PM

Conference for DSPs (In-Person)

September 17 | 9:30 AM - 12:30 PM

Professional Development Training: Pieces to the Group Home Financial Puzzle Training (In-Person)

Daniel Gaafar & Eric Neidig, Bradley Associates, CPAs

October 8 - 10

Pre & Annual Conference: Honoring the Past, Treasuring the Present, Shaping the Future (In-Person)

November 12 – 13 | 9 AM - 4 PM

Professional Development Training: Person-Centered Individualized Support Plan Facilitator Training (In-Person)

Gwen Chesterfield



Visits w/ INARF Members

Recent:

- March 25 - CEO Regional Lunch 'n Learn / Wabash Center, Inc. (Lafayette)

- ✓ Plans to Prosper, LLC
- ✓ Sycamore Services, Inc.
- ✓ The Arc of Greater Boone County
- ✓ Wabash Center, Inc.



- April 23 – Wabash Center, Inc. Leadership Team Presentation (Lafayette)
- April 24 – Film Premier / Marshall-Starke Development Center, Inc. (Plymouth)

Upcoming:

- June 18 - CEO Regional Lunch 'n Learn / Stone Belt Arc, Inc. (Bloomington)
- July TBD - CEO Regional Lunch 'n Learn / Ft. Wayne





“We Heard You”



Members are our #1 asset, and we strive to LISTEN to suggestions gleaned through casual conversations, email communications, survey feedback ...

Our efforts this past month focused on the redevelopment of the **DSP Award!**

Every year we call for nominations for outstanding DSPs at your organizations. This year, we have revamped the eligibility criteria and omitted the requirement that they be enrolled, or intend to enroll, in post-secondary education.

- ✓ DSP with an INARF Member organization
- ✓ Worked with the organization for 2+ years
- ✓ Focused on person-centered supports

Call for nominations coming soon!



Industry Update

Katy Stafford-Cunningham, Brandi Foreman, & Courtney Scott, INARF



VR Proposed State Plan

- Service Provider Responsibilities

- Notify the VR program in writing within ten business days of any change in status to the service provider's license, certification, accreditation, or permit
- Notify the VR program in writing within five business days of receiving a participant's referral, if they decline to provide VR services to a participant
- If a service provider cannot accept new participants due to insufficient staff resources, the service provider must notify the VR program in writing within 2 business days of receiving the participant's referral and once the VR program receives the written notice, the service provider shall not be available to be selected by participants as a service provider, until the service provider notifies the VR program in writing of its ability to accept new participants



Medicaid Unwinding

- New applicants with income at or above 150% FPL who are approved for MEDWorks will be approved conditionally.
 - A conditionally approved applicant is someone who has been determined eligible for coverage, but their coverage will not be activated until they make their first payment
- For conditionally approved applicants who pay their first premium, their coverage will begin up to three months prior to the application month if they were eligible in all three retroactive months
- MEDWorks members who are disenrolled for nonpayment and reapply, must catch up on all of their missed payments or serve a 2-year lockout period
- Copays no longer apply to MEDWorks



Minimum Staffing Standards for LTC Facilities and Medicaid Institutional Payment Transparency Reporting

- Final rule with an effective date of June 21, 2024
- Facilities must provide at a minimum, 3.48 total nurse staffing hours per resident day (HPRD) of nursing care, with .55 RN HPRD and 2.45 HPRD.
- Requires all LTC facilities to have an RN onsite 24 hours a day 7 days a week.
- [View the Minimum Staffing to LTC Facilities and Medicaid Institutional Payment Transparency Reporting Final Rule](#)



FTC: Non-Compete Rule

- The final rule allows existing non-competes with senior executives to remain in force.
- Existing non-competes with other workers are not enforceable after the effective date.
- The U.S. Chamber of Commerce stated that they will sue to block this measure.
- [Federal Trade Commission Announces Rule Banning Noncompetes](#)



Pathways for Aging Update

- **Mail Notification:** Letters dispatched in February 2024.
- **Enrollment Deadline:** April 30, 2024. Visit www.in.gov/Pathways for a copy of the template letter and copy of April recording.
- **Auto Enrollment Start:** May 1, 2024.
- **Go Live:** July 1, 2024
- **Members can change their Pathways enrollment:**
 - Within 90 days of coverage start.
 - Anytime Medicare and Medicaid plans differ.
 - Once per calendar year for any reason.
 - At any time for just cause (e.g., poor quality of care).
 - During the plan selection period aligning with Medicare open enrollment.
- **Enrollment Broker Contact:** Call 87-PATHWAY-4 (877-284-9294), Monday - Friday, 8 AM - 7 PM EST.

Additional Notes:

- Provider directories are being updated as providers and plans are still in the contracting process.
- All Managed Care Entities (MCEs) will maintain an open network until network adequacy is achieved.



CMS Final Rule Update

- **Medical Care Advisory Committees renamed to Medicaid Advisory Committee (MAC).**
 - States are now required to establish a Beneficiary Advisory Council (BAC) that includes Medicaid beneficiaries, their families, and/or caregivers within 1 year of effective date of rule.
 - MAC membership minimum requirements include that 25% of MAC members are drawn from the BAC.
 - Gradual increase in BAC representation on MAC up to 25% over 2 years.
 - Annual report deadline: States have 2 years from the effective date to finalize and post the first annual report within 30 days.
 - Public availability of MAC and BAC activities, mandatory public access to at least two MAC meetings per year with public comments.



CMS Final Rule Update

HCBS Enhancements

- **Enhanced Oversight:** Strengthened oversight of person-centered service planning in Home and Community-Based Services (HCBS).
- **Incident Management:** States required to meet national incident management system standards for monitoring HCBS programs.
- **Grievance System:** Establishment of a grievance system for HCBS delivered through Fee-For-Service (FFS).
- **Data Reporting Obligations:**
 - **Year 3:** States to report readiness for collecting data on Medicaid payments spent on direct care worker compensation.
 - **Year 4:** States to report the percentage of Medicaid payments for certain services spent on direct care worker compensation.
- **Payment Adequacy Provision:**
 - **Year 6:** At least 80% of Medicaid payments for specific services must go to direct care worker compensation, with certain exceptions.
 - For: Personal Care Services, Home Health Aide, Homemaker
 - **Flexibilities:** Hardship exemptions and performance levels for small providers.
 - **Exemptions:** Indian Health Service and Tribal health programs are exempt under specific provisions.
- **Quality and Performance Reporting:** States to report on waiting lists, service delivery timeliness, and standardized HCBS quality measures.
- **Public Transparency:** Promotion of public transparency in HCBS through reporting of quality, performance, and compliance measures.



CMS Final Rule Update

Fee-for-Service (FFS) Transparency and Advisory Measures

- States required to publish all FFS Medicaid fee schedule payment rates on a publicly accessible website starting July 1, 2026.
- Biennial comparison of FFS rates to Medicare rates and average hourly rate publication starting July 1, 2026.
- States to publish the average hourly rate for personal care, home health aide, homemaker, and habilitation service biennially starting July 1, 2026.
- Establishment of an advisory group to consult on payment rates for direct care workers meeting initially within 2 years from the rule's effective date.
- States must demonstrate access sufficiency through an initial analysis when proposing rate reductions or service restructurings that might diminish access.
 - If initial requirements are not met, a more extensive analysis is required.



DOL Overtime Updates

- **Standard Salary Level:**
 - **Current Amount:** \$684 per week (\$35,568 annually)
 - **July 1, 2024 Amount:** Increases to \$844 per week (\$43,888 annually)
 - **January 1, 2025 Amount:** Increases to \$1,128 per week (\$58,656 annually)
- **Highly Compensated Employees (HCE) Threshold:**
 - **Current Amount:** \$107,432 annually
 - **July 1, 2024 Amount:** Increases to \$132,964 annually
 - **New Amount:** Increases to \$151,164 annually
 - **Effective Date:** January 1, 2025



DOL Overtime Updates

- **Updating Mechanism:**

- An updating mechanism is established to adjust the salary levels starting July 1, 2024. It will then continue with updates every three years, beginning July 1, 2027, to reflect current earnings data.
- Standard Salary Level: This update sets the threshold at the 35th percentile of earnings of full-time salaried workers in the lowest-wage Census Region, specifically the South. This change aims to more accurately delineate which employees qualify as exempt under the EAP categories in a simplified one-test system.
- Highly Compensated Employees (HCE): This adjustment targets the annualized weekly earnings of the 85th percentile of full-time salaried workers nationally, aiming to better define which high-earning employees can qualify for exemption based on a minimal duties test.



DOL Overtime Updates

Action Items:

- **By July 1, 2024:**
 - Employers should prepare for the initial update of the standard salary level and the HCE total annual compensation threshold.
 - Review and adjust payroll systems to ensure they reflect the updated thresholds starting from January 1, 2025.
 - Begin planning for budget adjustments due to increased salary thresholds for exempt employees.
- **By January 1, 2025:**
 - Implement the new salary thresholds:
 - Ensure that employee classifications comply with the new thresholds.
 - Adjust employment contracts and compensation packages for affected employees to maintain compliance with the new rule.

View the final rule: <https://www.dol.gov/sites/dolgov/files/WHD/flsa/ot-541-final-rule.pdf>



DDRS Advisory Council

- Medicaid Forecast Mitigation
 - End to retroactive Medicaid eligibility
 - DOES NOT APPLY TO INDIVIDUALS CURRENTLY ENROLLED IN MEDICAID
 - Only applies to initial eligibility determinations
 - Expedited SFC Provider approval – over 200 new providers applied
 - A&D plans receiving additional review include
 - More than 240 hours of ATTN per month for a person 22 years or older
 - More than 80 hours of ATTN per month for a person under 22
 - Any plans with an LRI providing services
- Order of Selection
 - Plan is to get out of order of selection by January 1, 2025



A&D Waitlist Info

- Waiting list will go live April 24
- 50,000 slots on A&D Waiver – separate wait lists for A&D and Pathways
- The State has evaluated the current list of all individuals who are not active on the Aged and Disabled Waiver based on the priority criteria established in the waiver.
- Based on the remaining waiver capacity and prioritization, some of the individuals who are not active will move forward with the Aged and Disabled Waiver while others will be moving to the waiting list. Any new applicants will be placed on the waiting list until additional slots become available after July 1.
- Your client/constituents should be receiving notification by mail within the next several days with information about their application.
- If you have any questions, please see FAQs [here](#), which includes a contact list for additional questions.



A&D Attendant Care Billing

- Effective March 1, 2024, providers rendering SFC and ATTN services are required to provide the name of the individual providing the service and relationship to the member as a claim note
- Hard edit will turn on in 2 weeks and denials will start
- 20% current compliance
- Batch billing still allowed
- <https://www.in.gov/medicaid/providers/files/bulletins/BT202411.pdf>



INARF Upcoming Events: CQL Webinars

- ~~DSP Workforce Issues – March 12, 11 AM (EST)~~
 - ~~INARF DSP Workforce Strategic Priority~~
- ~~Data & Decision-Making – April 9, 11 AM (EST)~~
 - ~~INARF Data Collection Strategic Priority~~
- Introduction to the Basic Assurances[®] - May 14, 11 AM (EST)
 - INARF Managed Care Strategic Priority



Thank you, PAC Donors!

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INARF PAC





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INARF PAC

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